

CONFIRMATION NO. 3984

Bib Data Sheet

SERIAL NUMBER 09/553,424	FILING DATE 04/19/2000  RULE.	CLASS 435	GROUP ART UNIT 1654	ATTORNEY DOCKET NO. 020444-000400US
-----------------------------	--	--------------	------------------------	--

## APPLICANTS

Luke V. Schneider, Half Moon Bay, CA;

## \*\* CONTINUING DATA \*\*\*\*\*

This appln claims benefit of 60/130,238 04/20/1999  
and claims benefit of 60/075,715 02/24/1998

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* SMALL ENTITY \*\*

\*\* 06/26/2000

Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<table border="1"><tr><td><input type="checkbox"/> yes</td><td><input checked="" type="checkbox"/> no</td></tr><tr><td><input type="checkbox"/> yes</td><td><input checked="" type="checkbox"/> no</td></tr></table> Met after Allowance Examiner's Signature <u>GS</u> Initials	<input type="checkbox"/> yes	<input checked="" type="checkbox"/> no	<input type="checkbox"/> yes	<input checked="" type="checkbox"/> no	STATE OR COUNTRY CA	SHEETS DRAWING 19	TOTAL CLAIMS 38	INDEPENDENT CLAIMS 7
<input type="checkbox"/> yes	<input checked="" type="checkbox"/> no								
<input type="checkbox"/> yes	<input checked="" type="checkbox"/> no								

## ADDRESS

20350  
TOWNSEND AND TOWNSEND AND CREW, LLP  
TWO EMBARCADERO CENTER  
EIGHTH FLOOR  
SAN FRANCISCO , CA  
94111-3834

## TITLE

METHODS FOR CONDUCTING METABOLIC ANALYSES

FILING FEE  RECEIVED 728	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<table border="1"><tr><td><input type="checkbox"/> All Fees</td></tr><tr><td><input type="checkbox"/> 1.16 Fees ( Filing )</td></tr><tr><td><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )</td></tr><tr><td><input type="checkbox"/> 1.18 Fees ( Issue )</td></tr><tr><td><input type="checkbox"/> Other _____</td></tr><tr><td><input type="checkbox"/> Credit</td></tr></table>	<input type="checkbox"/> All Fees	<input type="checkbox"/> 1.16 Fees ( Filing )	<input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )	<input type="checkbox"/> 1.18 Fees ( Issue )	<input type="checkbox"/> Other _____	<input type="checkbox"/> Credit
<input type="checkbox"/> All Fees								
<input type="checkbox"/> 1.16 Fees ( Filing )								
<input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )								
<input type="checkbox"/> 1.18 Fees ( Issue )								
<input type="checkbox"/> Other _____								
<input type="checkbox"/> Credit								